

PART B - FEE(S) TRANSMITTAL

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58563 7590 06/30/2006

HARRITY SNYDER, L.L.P.
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(Depositor's name)

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(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/592,241	06/13/2000	Jeff C. Kunins	TM00-004.US	5696

TITLE OF INVENTION: METHOD AND APPARATUS FOR ZERO-FOOTPRINT PHONE APPLICATION DEVELOPMENT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	<input checked="" type="checkbox"/> NO	\$700 \$1400	\$0	\$700 \$1400	10/02/2006
EXAMINER		ART UNIT	CLASS-SUBCLASS		
WOOD, WILLIAM H		2193	717-125000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1 Harrity Snyder, LLP
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		2 _____
<input checked="" type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		3 _____

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Tellme Networks, Inc.

Mountain View, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Authorized Signature / Paul A. Harrity/

Date October 2, 2006

Typed or printed name Paul A. Harrity

Registration No. 39,574

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